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**APPLICANTS**  
Robin E. O'Brien, Ringwood, UNITED KINGDOM;

**\*\* CONTINUING DATA \*\*\*\*\***  
None NY

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
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**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
\*\* 03/21/2002

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 5	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: [Signature] Initials: NY				

**ADDRESS**  
NIXON & VANDERHYE P.C.  
8th Floor  
1100 North Glebe Road  
Arlington, VA 22201-4714

**TITLE**  
ATM cell handling

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